

BAND APPLICATION

Today's Date :

D D M M Y Y Y Y

BAND/ARTIST INFORMATION

Band / Artist Name :

Location :

How many members :

Member Names :

Genre(s) :

Original music :

Cover music? If yes, what kind :

Costs for 2 hour set :

\$

☐ Check if you require sound equipment setup (mics, cables, etc.)

CONTACT INFORMATION

First Name :

Last Name :

Mailing Address :

City :

State :

Zip Code :

Phone Number :

E-mail :

Website :

Social Media :

Facebook

Instagram

YouTube

Average Draw
(Per Show) :

How will you promote your appearance?

- ☐ Website
- ☐ Social Media (Facebook, Instagram, Google+, etc.)
- ☐ Live Shows
- ☐ Posters, Flyers
- ☐ Personal Invitations

THANK YOU FOR YOUR INFORMATION

Office Use Only :

Date Reviewed :

☐ Accepted
☐ Denied